plan of each area surveyed, the trigger level established for each area, the detected dose rate at several points in each area expressed in millirem per hour or the removable contamination in each area expressed in disintegrations per minute per 100 square centimeters, the instrument used to make the survey or analyze the samples, and the initials of the individual who performed the survey.

[51 FR 36951, Oct. 16, 1986, as amended at 53 FR 19247, May 27, 1988]

§ 35.75 Release of individuals containing radiopharmaceuticals or permanent implants.

- (a) The licensee may authorize the release from its control of any individual who has been administered radiopharmaceuticals or permanent implants containing radioactive material if the total effective dose equivalent to any other individual from exposure to the released individual is not likely to exceed 5 millisieverts (0.5 rem).
- (b) The licensee shall provide the released individual with instructions, including written instructions, on actions recommended to maintain doses to other individuals as low as is reasonably achievable if the total effective dose equivalent to any other individual is likely to exceed 1 millisievert (0.1 rem). If the dose to a breast-feeding infant or child could exceed 1 millisievert (0.1 rem) assuming there were no interruption of breast-feeding, the instructions shall also include:
- (1) Guidance on the interruption or discontinuation of breast-feeding and
- (2) Information on the consequences of failure to follow the guidance.
- (c) The licensee shall maintain a record of the basis for authorizing the release of an individual, for 3 years after the date of release, if the total effective dose equivalent is calculated by:
- (1) Using the retained activity rather than the activity administered,

- (2) Using an occupancy factor less than 0.25 at 1 meter,
- (3) Using the biological or effective half-life, or
- (4) Considering the shielding by tissue.
- (d) The licensee shall maintain a record, for 3 years after the date of release, that instructions were provided to a breast-feeding woman if the radiation dose to the infant or child from continued breast-feeding could result in a total effective dose equivalent exceeding 5 millisieverts (0.5 rem).

[62 FR 4133, Jan. 29, 1997]

§ 35.80 Technical requirements that apply to the provision of mobile nuclear medicine service.

A licensee providing mobile nuclear medicine service shall:

- (a) Transport to each address of use only syringes or vials containing prepared radiopharmaceuticals or radiopharmaceuticals that are intended for reconstitution of radiopharmaceutical kits:
- (b) Bring into each address of use all byproduct material to be used and, before leaving, remove all unused byproduct material and all associated waste;
- (c) Secure or keep under constant surveillance and immediate control all byproduct material when in transit or at an address of use;
- (d) Check survey instruments and dose calibrators as described in §§ 35.50 and 35.51, and check all other transported equipment for proper function before medical use at each address of use:
- (e) Carry a radiation detection survey meter in each vehicle that is being used to transport byproduct material, and, before leaving a client address of use, survey all radiopharmaceutical areas of use with a radiation detection survey meter to ensure that all radiopharmaceuticals and all associated waste have been removed;
- (f) Retain a record of each survey required in paragraph (e) of this section for three years. The record must include the date of the survey, a plan of each area that was surveyed, the measured dose rate at several points in each area of use expressed in millirem per hour, the instrument used to make the

¹Regulatory Guide 8.39, "Release of Patients Administered Radioactive Materials," describes methods for calculating doses to other individuals and contains tables of activities not likely to cause doses exceeding 5 millisieverts (0.5 rem).